UNITED STATES DISTRICT COURT

8	for the
WESTERN D	istrict of NEW YORK
,	Division DEC 7 2020
MICHAEL HAWKINS #10-A-3367) Case No. WESTERN DISTRICT OF NY
Plaintiff(s) (Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.) -V- D. Miller, Correctional Officer	(to be filled in by the Clerk's Office) 20 CV1798 Jury Trial: (check one) Yes No
F. Petrlno Correctional Officer D. Peterkin, Correctional Officer)
Defendant(s) (Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.))))

COMPLAINT FOR A CIVIL CASE

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	Michael T. Hawkins #10-A-3367		
Street Address	Clinton Correctional Facility		
City and County	Box 2001		
State and Zip Code	Dannemora,New York 12929		
Telephone Number			
E-mail Address			

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1	
Name	F. Petrino Correctional Officer
Job or Title (if known)	Orleans Correctional Facilty
Street Address	3531 Galnes Basin Road
City and County	Albion, New York 1441
State and Zip Code	
Telephone Number	
E-mail Address (if known)	
Defendant No. 2	
Name	D. Miller, Correctional Officer
Job or Title (if known)	Orleans Correctional Facility
Street Address	3531 Galnes Basin Road
City and County	Albion, New York 1441
State and Zip Code	
Telephone Number	
E-mail Address (if known)	
	·
Defendant No. 3	
Name	J. Cook, Correctional OfFICE
Job or Title (if known)	Orleans Correctional Facility
Street Address	3531 Galnes Basin Road
City and County	Albion, New York 1441
State and Zip Code	
Telephone Number	
E-mail Address (if known)	
7 0 1	
Defendant No. 4	
Name	J. Sullivan, Correctional
Job or Title (if known)	Orleans Correctional Facility
Street Address	3531 Galnes Basin Road
City and County	Albion, LIEW YORK 14411
State and Zip Code	
Telephone Number	
E-mail Address (if known)	

Defendant No. 5 D. Peterkin, Correctional Officer Orleans Correctional Facility 3531 Galnes Basin Road Albion, New York 14411

Defendant No. 6 C. Ramming, Correctional Officer Orleans Correctional Facility 3531 Galnes Basin Road Albion, New York 14411

Defendant No. 7

K. Crowley, Correctional Officer
Orleans Correctional Facility
3531 Galnes Basin Road
Albion, New York 14411

Defendant No. 8
Stearne, Nurse
Orleans Correctional Facility
3531 Galnes Basin Road
Albion, New York 14411

II. Basis for Jurisdiction

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What	is the b		federal court jurisdiction? (check all that apply) estion Diversity of citizenship		
	× •••	orar que	Diversity of ottaonship		
Fill o	ut the pa	ıragrapl	ns in this section that apply to this case.		
A.	If the	If the Basis for Jurisdiction Is a Federal Question			
	are at First Eigh	issue in Ameno t Amen		ed States Constitution that	
В.	If the	Basis	for Jurisdiction Is Diversity of Citizenship		
	1. The Plaintiff(s)				
		a.	If the plaintiff is an individual		
			The plaintiff, (name)	, is a citizen of the	
			State of (name)		
		b.	If the plaintiff is a corporation		
			The plaintiff, (name)	, is incorporated	
			under the laws of the State of (name)		
			and has its principal place of business in the State of (name)		
			•		
			ore than one plaintiff is named in the complaint, attach an additio information for each additional plaintiff.)	nal page providing the	
	2.	The I	Defendant(s)		
		a.	If the defendant is an individual		
			The defendant, (name)	, is a citizen of	
			the State of (name)	. Or is a citizen of	
			(foreign nation)		

b.	If the defendant is a corporation	
	The defendant, (name)	, is incorporated under
	the laws of the State of (name)	, and has its
	principal place of business in the State of (name)	
	Or is incorporated under the laws of (foreign nation	n)
	and has its principal place of business in (name)	,
The A	ore than one defendant is named in the complaint, a information for each additional defendant.) Amount in Controversy amount in controversy—the amount the plaintiff clain—is more than \$75,000, not counting interest and co	ns the defendant owes or the amount at

III. Statement of Claim

3.

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

On January 15, 2018 at approximately 3:45 PM Plaintiff was assaulted by Correctional Officers D. Miller, F. Petrino, D. Peterkin, J Cook, C. Ramming, and J. Sullivan, when each officer took part in throwing Plaintiff on the floor. Officer F. Petrino punched plaintiff in the face several times. Officer J. Cook kicked Plaintiff in his head. After Plaintiff started screaming all the officers, D. Miller, F. Petrino, D. Peterkin, J Cook, C. Ramming, and J. Sullivan started punching on and kicking Plaintiff in the face, head, body and dislocated the Plaintiff's left arm. After the assault officer F. Petrino said "stupld rasta" to the Plaintiff and began pulling Plaintiff religious locks out of Plaintiff's head ripping them out at the root. After being taking to the hospital the next day, nurse Stearne failed to provide Plaintiff with treatment for his injuries.

IV. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

Plaintiff is demanding to be compensated in the amount of \$1,000.000.00 for being assaulted and \$500,000.00 for the pain and suffering the Plaintiff endured as a result of the assaults by the officers and the negligence by nurse Stearne.

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case—related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

	in the dismissal of my case.	
	Date of signing: 11/23/20	020
X	Signature of Plaintiff Printed Name of Plaintiff	Michael Hawkins #10-A-3367
В.	For Attorneys	
	Date of signing:	
	Signature of Attorney	
	Printed Name of Attorney	
	Bar Number	
	Name of Law Firm	
	Street Address	
	State and Zip Code	
	Telephone Number	
	E-mail Address	

Michael Hawkins #10-A-3367 Clinton Correctional Facility Box 2001 Dannemora, New York 12929

November 23, 2020

U.S. DISTRICT COURT
U.S. Courthouse
2 Niagara square
Buffalo, New York 14202

RE: 42 U.S.C. 1983

Attention: Court Clerk,

Enclosed is my Complaint for a Civil case.
In anticipation of reciving from you in the coming days,
I thank you for your time and attention.

Very Truly Yours,

Ma Sufind

DEC -7 2020

BUTTEALO

Michael Hawkins #10-A-3367 Clinton Correctional Facility. Box 2001

Dannemora, New York 12929

12/03/2020

THE CHILDIN

U.S. DISTRICT COURT U.S. Courthouse 2 Niagara Square Buffalo, New York 14202

CLINTON CORRECTIONAL FACILITY
LAW LIBRARY

FGAL MAIL ONLY

JS 44 (Rev. 09/19)

CIVIL COVER SHEET

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON NEXT PAGE OF THIS FORM.)

	·					
I. (a) PLAINTIFFS		DEFENDANT	rs			
Michael	Hawkins #10-A-3367	Mille	Miller et al			
(b) County of Residence of First Listed Plaintiff		County of Residen	nce of First Listed Defendant			
	XCEPT IN U.S. PLAINTIFF CASES)		(IN U.S. PLAINTIFF CASES			
		NOTE: IN LAND THE TRA	CONDEMNATION CASES, USE T CT OF LAND INVOLVED.	THE LOCATION OF		
(c) Attorneys (Firm Name,	Address, and Telephone Number)	Attorneys (If Know	n)			
II. BASIS OF JURISDI	ICTION (Place an "X" in One Box Only)	III. CITIZENSHIP OF	PRINCIPAL PARTIES	(Place an "X" in One Box for Plaintig		
☐ 1 U.S. Government	3 Federal Question	(For Diversity Cases Only	y) PTF DEF	and One Box for Defendant) PTF DEF		
Plaintiff	(U.S. Government Not a Party)	Citizen of This State	1 Incorporated or Prof Business In 2	rincipal Place 🔲 4 🗂 4		
2 U.S. Government Defendant	☐ 4 Diversity (Indicate Citizenship of Parties in Item III)	Citizen of Another State	□ 2 □ 2 Incorporated and of Business In			
		Citizen or Subject of a Foreign Country	3 3 Foreign Nation	□ 6 □ 6		
IV. NATURE OF SUIT				of Suit Code Descriptions.		
CONTRACT 110 Insurance	PERSONAL INJURY PERSONAL INJU	RY 0 625 Drug Related Seizure	BANKRUPTCY 422 Appeal 28 USC 158	OTHER STATUTES ☐ 375 False Claims Act		
☐ 120 Marine	☐ 310 Airplane ☐ 365 Personal Injury	- of Property 21 USC 88	1 423 Withdrawal	☐ 376 Qui Tam (31 USC		
☐ 130 Miller Act ☐ 140 Negotiable Instrument	☐ 315 Airplane Product Product Liability ☐ 367 Health Care/	ty 690 Other	28 USC 157	3729(a)) 400 State Reapportionment		
☐ 150 Recovery of Overpayment	☐ 320 Assault, Libel & Pharmaceutical		PROPURITY RIGHTS	☐ 410 Antitrust ☐ 430 Banks and Banking		
& Enforcement of Judgment 151 Medicare Act	Slander Personal Injury 330 Federal Employers' Product Liability	y	☐ 820 Copyrights ☐ 830 Patent	☐ 450 Commerce		
☐ 152 Recovery of Defaulted Student Loans	Liability 368 Asbestos Person 340 Marine Injury Product	nal	☐ 835 Patent - Abbreviated New Drug Application	☐ 460 Deportation ☐ 470 Racketeer Influenced and		
(Excludes Veterans)	☐ 345 Marine Product Liability		☐ 840 Trademark	Corrupt Organizations		
☐ 153 Recovery of Overpayment of Veteran's Benefits	Liability PERSONAL PROPI	ERTY LABOR 710 Fair Labor Standards	SOCIAL SECURITY 861 HIA-(1395ff)	480 Consumer Credit (15 USC 1681 or 1692)		
☐ 160 Stockholders' Suits	355 Motor Vehicle 371 Truth in Lendin	g Act	☐ 862 Black Lung (923)	☐ 485 Telephone Consumer		
 190 Other Contract 195 Contract Product Liability 	Product Liability 380 Other Personal 360 Other Personal Property Damag	☐ 720 Labor/Management Relations	■ 863 DIWC/DIWW (405(g)) ■ 864 SSID Title XVI	Protection Act 490 Cable/Sat TV		
☐ 196 Franchise	Injury 385 Property Damag 362 Personal Injury - Product Liability		☐ 865 RSI (405(g))	■ 850 Securities/Commodities/ • Exchange		
	Medical Malpractice	Leave Act		☐ 890 Other Statutory Actions		
REAL PROPERTY 210 Land Condemnation	CIVIL RIGHTS PRISONER PETITION 440 Other Civil Rights Habeas Corpus:	ONS 790 Other Labor Litigation 791 Employee Retirement	FEDERAL TAX SUITS ☐ 870 Taxes (U.S. Plaintiff	☐ 891 Agricultural Acts ☐ 893 Environmental Matters		
☐ 220 Foreclesure	☐ 441 Voting ☐ 463 Alien Detainee	Income Security Act	or Defendant)	☐ 895 Freedom of Information		
☐ 230 Rent Lease & Ejectment ☐-240 Torts to Land	☐ 442 Employment ☐ 510 Motions to Vaca Gentence	ate	☐ 871 IRS—Third Party 26 USC 7609	Act 896 Arbitration		
245 Tort Product Liability	Accommodations	TRANSFER LA TRANS		☐ 899 Administrative Procedure Act/Review or Appeal of		
☐ 290 All Other Real Property	☐ 445 Amer. w/Disabilities - ☐ 535 Death Penalty Employment Other:	IMMIGRATION ☐ 462 Naturalization Application	ion	Agency Decision		
	Other 550 Civil Rights	ther 465 Other Immigration Actions		950 Constitutionality of State Statutes		
	☐ 448 Education ☐ 555 Prison Condition	n				
	560 Civil Detainee - Conditions of					
V. ORIGIN (Place an "X" in	Confinement					
	moved from	☐ 4 Reinstated or ☐ 5 Tran	sferred from 6 Multidist	rict		
	te Court Appellate Court	Reopened Anot (spec	ther District Litigation ify) Transfer			
	142 U.S.C. \$1983	are filing (Do not cite jurisdictional s	tatutes unless diversity):			
VI. CAUSE OF ACTION	Brief description of cause: assault, excessiv	e force				
VII. REQUESTED IN COMPLAINT:	☐ CHECK IF THIS IS A CLASS ACTION UNDER RULE 23, F.R.Cv.P.	DN DEMAND \$ 1,500,000.00	CHECK YES only JURY DEMAND:	r if demanded in complaint: : Yes □No		
VIII. RELATED CASI	(See instructions):		D. 0			
IF ANY	JUDGE	TTORNEY OF RECORD	DOCKET NUMBER			
DATE	SIGNATURE OF A	TIONIEI OF RECORD				
FOR OFFICE USE ONLY						
RECEIPT# AM	MOUNT APPLYING IFF	JUDGE	MAG. JUI	DGE		